

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Alston et al.	Group No: 3771
Application No: 10/714,511 Confirmation No: 9835	Examiner: Dixon, Annette Fredricka
Filed: November 14, 2003	Attorney Docket No: 53305-US-CNT (NV.0175.00)
Title: AEROSOLIZATION APPARATUS WITH NON-CIRCULAR AEROSOLIZATION CHAMBER	March 1, 2010 San Francisco, CA 94107

Mail Stop Appeal Briefs-Patents Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Extension of Time <input type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136		
Via EFS <input type="checkbox"/> Response to Final Office Action <input checked="" type="checkbox"/> Response to Notice of Non-Compliant Appeal Brief <input type="checkbox"/> Notice of Appeal (Form PTO/SB31) <input type="checkbox"/> Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-SB08 Form <input type="checkbox"/> Citations <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Postcard for Return	Extension (Months)	Extension Fee	
		Large Entity	Small Entity
	<input type="checkbox"/> One Month	\$130.00	\$65.00
	<input type="checkbox"/> Two Months	\$490.00	\$245.00
	<input type="checkbox"/> Three Months	\$1,110.00	\$555.00
	Total \$ 0.00 <input checked="" type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.		

Fees for Extra Claims						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	Rate		Additional Fee
				Large Entity	Small Entity	
Total Claims	44	44	0	\$52.00	\$26.00	\$0.00
Independent Claims	4	4	0	\$220.00	\$110.00	\$0.00
Multiple Dependent Claims	0	0	0	\$390.00	\$195.00	\$0.00
Supplemental Information Disclosure Statement						
Total						\$0.00

Fee Payment <table> <tr> <td>Appeal Brief</td> <td align="center">\$0.00</td> </tr> <tr> <td>Fees for Extra Claims</td> <td align="center">\$0.00</td> </tr> <tr> <td>Total</td> <td align="center">\$0.00</td> </tr> </table>		Appeal Brief	\$0.00	Fees for Extra Claims	\$0.00	Total	\$0.00	Fee Deficiency <input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. 10-0258. and/or <input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. 10-0258.
Appeal Brief	\$0.00							
Fees for Extra Claims	\$0.00							
Total	\$0.00							
<input type="checkbox"/> Attached is check no. _____ in the sum of \$0.00. <input type="checkbox"/> Please charge Deposit Account No. 10-0258 in the sum of \$0.00 . CERTIFICATE OF TRANSMISSION (37 C.F.R. § 1.8a): I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450; facsimile transmitted to the U.S. Patent Office at (571) 263-8300; or electronically submitted via EFS on the date shown below: By: <u>Melanie Hitchcock</u> Date: <u>March 1, 2010</u> Melanie Hitchcock		Please direct telephone calls to: Guy V. Tucker at (415) 538-1555 Please send correspondence to: NOVARTIS Corporate Intellectual Property One Health Plaza 104/3 East Hanover, NJ 07936-1080 Respectfully submitted, <u>Guy V. Tucker</u> By: <u>Guy V. Tucker</u> Date: <u>March 1, 2010</u> Guy V. Tucker Registration No. 45,302						